

BOCA RATON CHRISTIAN SCHOOL

PERMISSION/RELEASE FORM FOR STUDENT PARTICIPATION IN COMPETITIVE SPORTS

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| MEDICAL INFORMATION FOR: _____ (Student's Name- PLEASE PRINT) |
| Check One: _____ Home school student _____ BRCS Student (Please pick up home school form in the school office.) |
| Social Security Number _____ |

Parent(s) Name _____

Home Phone _____ Work Phone (Father) _____ (Mother) _____

Student's Physician _____ Phone _____

Emergency Contact Person _____ Phone _____

Student's Birth date _____ Serious Illness _____

Allergies _____ Medication _____

Health Insurance Co. _____ ID Number _____

Hospital Preferred _____

CONSENT AND WAIVER

*I, the undersigned parent, and I, the student, understanding that there is a potential for injury when participating in competitive sports, do hereby consent to the participation of my (son/daughter) _____
Grade _____ in the sport of _____.*

I represent that he or she is in good physical health and that I am unaware of anything that would adversely affect my child's ability to participate in the sport. I expressly assume the risk that may be associated with this sport and acknowledge that Boca Raton Christian School cannot reasonably foresee or prevent every possible injury or circumstance that may give rise to an injury when participating in the sport.

In the event that any emergency medical procedures or treatment are required during the child's participation in the aforementioned sport, I give consent to the coach or other representative of the School arranging for or consenting to medical procedures or treatments.

I agree, as a parent or guardian, that our personal insurance coverage will be the primary insurance carrier in the event of a non-vehicular accidental injury. The insurance carrier for the vehicle will be the primary carrier in the event of a vehicular accidental injury.

I also give my permission for my (son/daughter) to ride to and from school sporting events on the transportation provided by the school unless other arrangements have been made. I also understand that if there are games on Saturday's, games played in the evening, or tournaments, that I will be responsible for transportation to those games.

Date _____

Parent's/Guardian's Signature _____

Student's Signature _____

BOCA RATON CHRISTIAN SCHOOL

AMATEUR MINOR ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in **Boca Raton Christian School** athletics/sports program, and related events and activities, the undersigned:

1. Agrees that the parent(s) and/or legal guardian(s) will instruct the minor participant that prior to participating he or she should inspect the facilities and equipment to be used. If the participant believes anything is unsafe, he or she should immediately advise his or her coach or supervisor of such condition(s) and refuse to participate.
2. Acknowledges and fully understands that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inaction or negligence but the action, inaction or negligence of others, the rules of play, or the condition of the premises or any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assumes all the foregoing risks and accepts personal responsibility for the damages following such injury, permanent total disability or death.
4. Releases, waives, discharges and covenants not to sue **Boca Raton Christian School** affiliated clubs, their respective administrators, directors, agents, coaches and other employees of the organization; other participants, sponsoring agencies, sponsors advertisers; and if applicable, owners and lessors of premises used to conduct the event of which are hereinafter referred to as “releases” from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims demands, losses, or damages on account of injury, including death and damage to property, caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise.

I HAVE READ THE ABOVE WAIVER AND RELEASE AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

Parent’s or Legal Guardian’s Signature

Date

Print Name

Give Relationship to Participant

Print Name of Participant

Participant’s Telephone

Participant’s Address

BOCA RATON CHRISTIAN SCHOOL
INTERSCHOLASTIC SPORTS COMMITMENT FORM

I agree to maintain a high standard of Christian sportsmanship, both during practice and in games.

I will be willing to demonstrate a cooperative attitude and good behavior at all times in order to participate in this program.

I am aware that I must maintain a 2.0 GPA in Grades 6-12 and may not be on conduct or academic probation to be eligible to participate.

I will respect my teammates and my coaches and abide by their decisions during practice and regarding playing time during games.

I will try and know what my role is, accept it, and fill that role with a positive attitude doing what is best for my team.

I agree, as a parent, to pick up my son/daughter as soon as practice or a game ends so as not to make a coach stay late waiting for me.

I agree to return my uniform in good condition, or understand that if I lose it or if it is not in good condition, I will be charged the replacement value of that uniform.

I agree to provide transportation, if necessary, to get my son/daughter to a game.

I agree that if I quit a team after attending two weeks of practices, without the approval of the coach, I will not be eligible to participate in a BRCS sport during the following season. Any exception to this rule must be approved by the Athletic Director.

Parent's Signature

Player's Signature

Date